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## BIB DATA SHEET

CONFIRMATION NO. 2648

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.      |                           |                                |
|--|---|--|---|-----------------------------|---------------------------|--------------------------------|
| 09/819,788   | 03/28/2001<br>RULE  | 340  | 2621  | 10191/3242                  |                           |                                |
| <b>APPLICANTS</b><br>Daniel J. Reese, Landisville, PA;<br>Douglas M. Camens, Lancaster, PA;<br>Paul J. Bodell, Lancaster, PA;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>05/30/2001 |   |  |   |                             |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /HUY THANH NGUYEN/<br>Acknowledged Examiner's Signature         |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>PA   | <b>SHEETS DRAWINGS</b><br>2 | <b>TOTAL CLAIMS</b><br>20 | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>KENYON & KENYON LLP<br>ONE BROADWAY<br>NEW YORK, NY 10004<br>UNITED STATES   |   |  |   |                             |                           |                                |
| <b>TITLE</b><br>Multi video device control and expansion method and apparatus  |   |  |   |                             |                           |                                |
| <b>FILING FEE RECEIVED</b><br>710  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                             |                           |                                |